

DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT

REFERREI	D FOR ACTION
ANSWER F	OR MY SIGNATURE
FOR FILE	
FOR YOUR	RINFORMATION
FOR SIGN	ATURE
RETURN T	O ME
PLEASE SI	EE ME
PLEASE TI	ELEPHONE ME
FOR APPR	OVAL
PLEASE A	DVISE ME
BY [DATE
BY [DATE
BY [DATE

STATE PROJECT NO. HIGHWAY ROUTE PARISH

MEMORANDUM

T O:	MRS. DEBORAH MCKNEELY
	REAL ESTATE PROPERTY MANAGEMENT OFFICER

FROM:

DATE:

RE: ADVERSELY IMPACTED PROPERTY

Parcel No. Owner(s)

The referenced Adversely Impacted property is being referred to your office for further handling. Attached are the following:

- 1. Copy of the voucher
- 2. Copy of recordation data
- 3. Copy of Act of Sale in the name of _____
- 4. Machine copy of the Appraisal Report on which the offer was based and the Review Sheet.
- 5. Full size Right of Way Sheet showing the referenced property
- 6. Adversely Impacted Form
- 7. Building Inspection Report (if not available when package transmitted, send as soon as it is available)

RECOMMENDED FOR APPROVAL DATE

RECOMMENDED FOR APPROVAL DATE

RECOMMENDED FOR APPROVAL DATE

APPROVED DATE

AN EQUAL OPPORTUNITY EMPLOYER
A DRUG-FREE WORKPLACE

Proposed vacate date occupant will vacate improvement after 90-Day	(Attach copy of lease, if Vacate Date.)
The property is recommended for disposal by the method shown on the attached AI form.	
If further information is needed, please advise.	